

ISSUE SLIP-STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER		10	10-9-01
FORMALITY REVIEW	SP	1133	10/21/01
RESPONSE FORMALITY REVIEW	SA	TC639	03-11-02

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
 = _____ Allowed I _____ Interference
 - (through numeral) _____ Cancelled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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46 43/01 851 03/11/05